	TIM 10/00/0	004								
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).					Complete if Known					
FEE TRANSMITTAL				Application Number 10/572,7			18			
For FY 2009				Filing Date 9/30/2004						
FOR FY 2009					First Named Inventor Yoshiyasu Fujiwara					
Applicant claims small entity status. See 37 CFR 1.27					iner Name	C. Teixeira Moffat				
					Art Unit         2857           Attorney Docket         0388 - 0					
TOTAL AMOUNT OF PAYMENT (\$) 65,00					ney Docket					
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order Other (please identify):										
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name: The Webb Law Firm										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17										
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.										
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)										
1. BASIC FILING, SEARCH, AND EXAMINATION FEES										
FILING FEES SEARCH F					EXAMINA'	\$				
				l Entity e (\$)	Fee (\$)	Small Entity Fee (\$) Fees I			aid (\$)	
Utility	330			270	220	110		rees 1 a	110 (3)	
Design		-		50	140	70	_			
Plant				165	170	85	<u></u>		<del></del>	
Reissue				270	650	325	_			
Provisional 220 110 0 0 0 0										
2. EXCESS CLAIM FEES Fee Description Fee (\$)									Small Entity Fee (\$)	
Each claim over 20 (including Reissues) 52									26	
Each independent claim over 3 (including Reissues)							2	20	110	
Multiple dependent claims							3	90	195	
Total Claims -	20 or HP	Extra Claims	Fee (S	<u>(3)</u>	Fee Paid (\$)		Mul	tiple De	pendent Claims	
	=_		x	=			Fe	ee (\$)	Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.										
Indep. Claims -	3 or HP	Extra Claims	Fee (	<u>\$)</u>	Fee Paid (\$)					
HP = highest number of	f independent claims		x	=						
HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE										
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under										
37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof.										
See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets										
- 100 = / 50 = (round up to a whole number) x =										
4. OTHER FEE(S)  Fees Paid (\$)										
Non-English Specification, \$130 fee (no small entity discount)										
Other (e.g., late filing surcharge): one-month Petition for Extension of Time									65	
SUBMITTED BY									•	
Signature Registration No. (Attorney/Agent) 23,024 Telephone 412-471-88										
(Automoy/Agent) -5,521										
Name (Print/Type) David C. Hanson Date June 1, 2011									1,2011	